UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

RECEIVED

OMB Number: 3235-0076

OMB APPRO

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NOTICE OF SALE OF SECURITIES PURSUANT TO

REGULATION D, SECTION 4(6), AND OR 02 UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY
Prefix Serial
DATE RECEIVED

Name of Offering ([] check if this is an amendment and nam	e has chan	ged, and indicate	change.)			
Class B Common Stock						
Filing Under (Check box(es) that apply): [] F	Rule 504	[] <u>Rule 505</u>	[X] Rule 506	[] Section 4(6)	[]ULOE	
Type of Filing: [] New Filing [X] Amendment						
A. B.	ASIC IDE	NTIFICATION	N DATA			
Enter the information requested about the issuer						
Name of Issuer ([] check if this is an amendment and name	has change	e, and indicate ch	ange			
In Control Advanced Driver Training, Inc.						
Address of Executive Offices (Number and Street, City, State, Zip Code)				elephone Number (Including Area Code)		
110 Haverhill Road, Suite 312 Amesbury, MA 01913	(888)	(888) 301-7233				
Address of Principal Business Operations (Number and Street, City, State, Zip Code)				Telephone Number (Including Area Code)		
110 Haverhill Road, Suite 312 Amesbury, MA 01913	(888)	(888) 301-7233				
Brief Description of Business:						
Development and operation of advanced driv	er traini	ng schools		D. t. co	-	
Type of Business Organization				ho	W Z 4 2004 /5	
[X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed				ື້ນ ນີ້ ທີ ່	COMSON NANGAL	
Actual or Estimated Date of Incorporation or Organization: Month Year [07] [15] [03]				[X] Actual [] Estimated		
Jurisdiction of Incorporation or Organization: (Enter two-letter ID 1 IE 1	U.S. Posta	al Service abbrevi	ation for State: C	N for Canada; FN for	other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA						
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 						
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Wallis, lan						
Business or Residence Address (Number and Street, City, State, Zip Code)						
9 Woodcrest Drive, West Newbury, MA 01985						
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Bogart, Brandon						
Business or Residence Address (Number and Street, City, State, Zip Code)						
44 Chase Road, South Hampton, NH 03827						
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Business of Residence Address (Number and Sireet, Oity, State, 21) Code)						
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING												
1. Has th	ne issuer sol	d, or does th	e issuer inte	nd to sell, to	non-accre	dited invest	ors in this o	ffering?			Yes	No [X]
		ndix, Columr										
2. What is the minimum investment that will be accepted from any individual?												
		permit joint o									[X]	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Nan	ne (Last nam	e first, if indi	vidual)									
Busines	s or Residen	ce Address (Number and	Street, Cit	y, State, Zip	Code)						
Name of	Associated	Broker or De	ealer		_							
		on Listed Ha or check indi				chasers					[]	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Nan	[SC] ne (Last nam	[SD] ie first, if indi	[TN] vidual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Rusines	s or Residen	ce Address	Number and	Street Cit	v State Zin	Code						
Dusines	s or ivesider	ce Address i	indiliber and	Street, Oil	y, State, Zip	(Code)						
Name of	f Associated	Broker or De	ealer									
		on Listed Ha				chasers						
		or check indi		•		roti	 -	rDC1		[C A]		All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[AW]	[WV]	[WI]	WY	[PR]
	ne (Last nam	e first, if indi	vidual)									
Busines	s or Residen	ce Address	Number and	Street, Cit	v. State. Zip	Code)	and the second					
Name of	Associated	Broker or De	ealer	, ,							· · · · · · · · · · · · · · · · · · ·	
		on Listed Ha									()	All Ctatas
(Check	"All States" (or check indi [AZ]	vidual States [AR]	S) [CA]	[CO]	[CT]	[DE]	[DC]	 [FL]	[GA]	[HI]	All States [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nan	ne (Last nam	e first, if indi	vidual)									
Busines	s or Residen	ce Address	(Number and	Street, Cit	y, State. Zin	Code)						
			·									
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
		or check indi			[00]	rı	וחבי	וחכז	 [⊑11	[CA1		All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[MS] [OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	IVTI	[VA]	[WA]	[O11] [WV]	[WI]	[O.1]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [X] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt		\$
Equity	\$250,000	\$250,000
[x] Common [] Preferred		'
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	\$	\$
Total	\$	\$
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	1	\$250,000
Non-accredited Investors		
Total (for filings under Rule 504 only)		
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of	Dollar Amount
Type of offering	Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504	<u> </u>	\$
Total	<u> </u>	\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs	[]	\$
Legal Fees	[X]	\$1,500
Accounting Fees	[]	\$
Engineering Fees	<u> </u>	\$
Sales Commissions (specify finders' fees separately)	<u> </u>	\$
Other Expenses (identify)	<u> </u>	\$
Total	 	\$
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$248,500

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to	
	Officers,	
	Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	[]\$
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuerpursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[]\$
Working capital	[]\$	[X] \$248,500
Other (specify):	[]\$	[]\$
Column Totals	[]\$0	[X] \$248,500
Total Payments Listed (column totals added)	[X] \$248,500	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Issuer (Print or Type) In Control Advanced Driver Training, Inc.	Signature Walus	Date 11/17/04
Name of Signer (Print or Type) lan Wallis	Title of Signer (Print or Type) Pro	esident

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)